

PART B - FEE(S) TRANSMITTAL

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CURRENT CORRESPONDENCE ADDRESS: (Note: Use Block 1 for any change of address)

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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
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10/789,573

02/27/2004

Erik J. Burckart

RSW920040010US1 (152)

7945

TITLE OF INVENTION: **SERVER-SIDE PROTOCOL CONFIGURATION OF ACCESSING CLIENTS**

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	No	\$1510	\$300	\$1810	03/03/2009
EXAMINER	ART UNIT	CLASS-SUBCLASS			
CHANG, JUNGWON	2454	709-230000			

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☒ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
 (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 A. Bruce Clay, Esq.

2 Steven M. Greenberg, Esq.

3 Carey Rodriguez Greenberg & Paul LLP

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

INTERNATIONAL BUSINESS MACHINES CORPORATION

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

ARMONK, NY

01 FEB 2009

02 FEB 15 04

1518.00 DA

300.00 DA

Please check the appropriate assignee category or categories (will not be printed on the patent):

☐ Individual ☒ Corporation or other private group entity ☐ Government

4a. The following fee(s) are enclosed:

- ☒ Issue Fee
☒ Publication Fee (No small entity discount permitted)
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- ☐ A check in the amount of the fee(s) is enclosed.
☐ Payment by credit card. Form PTO-2038 is attached.
☒ The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number **09-0461**

5. Change in Entity Status (from status indicated above)

- ☐ a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. ☐ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Authorized Signature /Steven M. Greenberg/

Date February 11, 2009

Typed or printed name Steven M. Greenberg

Registration No. 44,725

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